

CONTINUING VOUCHER FUNDING APPLICATION

REQUEST FOR EDUCATION VOUCHER FUNDING

Submit to: Arizona Department of Education, Exceptional Child Services, Attention: Vouchers Unit
1535 W. Jefferson, Bin # 24, Phoenix, AZ 85007 or FAX to: (602) 364-0428

The Private Residential Facility is responsible for ensuring that this form is completed for any child whose placement is expected to continue into the upcoming school year. The PRF is also responsible for obtaining appropriate signatures from the SPA and HSD.

PLEASE PRINT:

NAME OF CHILD: _____ DOB: ____/____/____

Residential Facility: _____ Voucher Number: _____

Contact Person: _____ Phone () _____

Educational Placement and funding option:

_____ (NSE) Child is **not eligible** for special education, in a residential facility for care, safety, or treatment.

_____ (CSE) Child is **eligible** for special education, in a residential facility for **care, safety, or treatment**. **

_____ (RSE) Child is **eligible** for special education **and** requires a residential facility for **educational reasons**. **

****If the IEP has been revised since the initial voucher was issued, you must attach a copy of the current IEP.**

STATE PLACING AGENCY: _____

Contact Person: _____ Phone () _____

Signature of SPA Representative

Date

HOME SCHOOL DISTRICT: _____

Contact Person: _____ Phone () _____

Signature of Home School District Representative

Date

FOR ARIZONA DEPARTMENT OF EDUCATION USE ONLY

Approval period: ____/____/____ to ____/____/____ VOUCHER NUMBER: _____

NSE CSE RSE Primary Disability Category: A EDP SLD MIMR MOMR VI HI OHI Other _____

Arizona Department of Education Representative

Date : ____/____/____